

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010760

FILED
Apr 27, 2007
Secretary of State

Entity Name: KING LAKE ESTATES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

21859 STATE ROAD 54 SUITE 700
LUTZ, FL 33549

New Principal Place of Business:

Current Mailing Address:

21859 STATE ROAD 54 SUITE 700
LUTZ, FL 33549

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOGER, DAVID
21859 STATE ROAD 54 SUITE 700
LUTZ, FL 33549 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BOGER, DAVID
Address: P.O. BOX 2133
City-St-Zip: LUTZ, FL 33548

Title: D () Delete
Name: BOGER, BRAD
Address: 21859 STATE ROAD 54, SUITE 700
City-St-Zip: LUTZ, FL 33549

Title: D () Delete
Name: BOGER, WENDY
Address: PO BOX 2133
City-St-Zip: LUTZ, FL 33548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRAD BOGER

D

04/27/2007

Electronic Signature of Signing Officer or Director

Date